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AUG 2 4 2006

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APPLICATION NO.	FILING DATE		FIRST NAMED	NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/659,310	10/659,310 09/11/2003			kahashi		242629US-2SCONT	3589
	IAGNOSTIC X-RAY SYST						
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300		\$1700	09/11/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS			•
THOMAS, CO	2882	2882 378-0620					
<ul> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>□ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ul>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1  OBLON, SPIVAK,  2  MCCLELLAND, MAIER  3  & NEUSTADT, RC.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will appe Γa substitute	ear on the paten for filing an assi	t. If an a gnment.	ssignee is identified below, the	document has been filed for
(A) NAME OF ASSIGN	EE		(B) RESIDE	NCE: (CITY and	STAMO	EDX 2000 IN MARAED 2 00000021	10659310
KABUSHIKI KAISHA TOSHIBA			Tokyo,	JAPAN		FC:1501 \ FC:1504	1400.00 OP 300.00 OP
Please check the appropriate	assignee category or catego	ries (will not be pri	inted on the p	atent): 🗖 Inc		Corporation or other private	group entity Government
4a. The following fee(s) are enclosed:   Solution   State    Solution   State    Advance   State    Advance			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).				
5. Change in Entity Status	(from status indicated above	e)					.,
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.				SMALL ENTITY status. See 37	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issuublication Fee (if required) vords of the United States Pate	ue Fee and Publicate will not be accepted ent and Trademark	tion Fee (if an I from anyone Office.	y) or to re-apply other than the a	any prev pplicant;	riously paid issue fee to the appl a registered attorney or agent; or	ication identified above. the assignee or other party in
	Fral & Brown				Date	AUG 2 4 2006	
Typed or printed name Fred L. Braun					Registrat	Reg. No. 56,1	23

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